

TOWN OF BETHEL, CONNECTICUT

Motor Vehicle Property Tax Exemption Application For <u>Active Duty</u> Members of the Armed Forces

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IF YOU CLAIM EXEMPTION IN THE TOWN OF BETHEL FOR TAXES ON YOUR MOTOR VEHICLE UNDER CGS §12-81(53), IT WILL BE NECESSARY FOR YOU TO COMPLETE THE FOLLOWING. A NEW APPLICATION MUST BE FILED ANNUALLY WITH THIS OFFICE. FAILURE TO FILE THIS APPLICATION PRIOR TO DECEMBER 31ST NEXT, FOLLOWING THE TAX DUE DATE, SHALL CONSTITUTE A WAIVER OF YOUR RIGHT TO THIS EXEMPTION.

•	y Information	
1. On October 1,, I, (Year of most recent past October 1 st)		was an active duty member of the armed orces as defined in CGS§ 27-103.
2. On the assessment date, I was attached to the follow	ring unit:	
3. I have been an Active Duty member of the Armed F	Forces since (month /date/	year):/
4. My permanent address is:	City or Town	State & Zip Code
5. Mailing address:		
5. Mailing address:Number & Street or PO Box	City or Town	State & Zip Code
6. Email Address:		
Ve	hicle Information	
6. Vehicle Registration (Plate) Number:	Make, Mode	and Year:
7. On the assessment date, this vehicle was (check one	e): Owned \square Leased \square (a	For leased vehicle complete 7 and 8)
8. Lease term: to:	Lessor:	e owner as it appears on the lease)
From (Mo/Date/Yr) To (Mo/Date/Yr)	(Name of Venicio	e owner as it appears on the lease)
9. Lessor's Address:Number & Street or PO Box	City or Town	State& Zip Code
	testation Statement	
I hereby claim a motor vehicle property tax exemption of Information herein provided is true and accurate to the b	or tax refund for a leased	* * * * * * * * * * * * * * * * * * * *
Signature of Active Duty Service Member		Date Signed
Ofj	fice Use Only	
GRAND LIST YEAR: Regular Supplemental	VEHICLE ASSESSMENT \$_	
Signature of Assessor/Staff D	Date	